

LISTING OF CLAIMS

The Listing of Claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims:

Claim 1 (cancelled)
Claim 2 (cancelled)
Claim 3 (cancelled)
Claim 4 (cancelled)
Claim 5 (cancelled)
Claim 6 (cancelled)
Claim 7 (cancelled)
Claim 8 (cancelled)
Claim 9 (cancelled)
Claim 10 (cancelled)
Claim 11 (cancelled)
Claim 12 (cancelled)
Claim 13 (cancelled)
Claim 14 (cancelled)
Claim 15 (cancelled)
Claim 16 (cancelled)
Claim 17 (cancelled)
Claim 18 (cancelled)
Claim 19 (cancelled)

Claim 20 (cancelled)

Claim 21 (cancelled)

Claim 22 (cancelled)

Claim 23 (cancelled)

Claim 24 (cancelled)

Claim 25 (cancelled)

Claim 26 (cancelled)

Claim 27 (cancelled)

Claim 28 (cancelled)

Claim 29 (cancelled)

Claim 30 (cancelled)

Claim 31 (cancelled)

Claim 32 (cancelled)

Claim 33 (cancelled)

Claim 34 (cancelled)

Claim 35 (cancelled)

Claim 36 (cancelled)

Claim 37 (cancelled)

Claim 38 (cancelled)

Claim 39 (cancelled)

Claim 40 (previously presented): A method for treating breast cancer in a patient having a chemotherapy responsive breast cancer, comprising the steps of:

(a) administering to the patient in a first plurality of chemotherapy cycles a therapeutically-effective and well-tolerated amount of doxorubicin, said first plurality chemotherapy cycles being administered in a dose-dense protocol;

(b) after the completion of the first plurality of chemotherapy cycles, administering to the patient in a second plurality of chemotherapy cycles a therapeutically-effective and well-tolerated amount of a taxane chemotherapy agent, said second plurality of chemotherapy cycles being administered in a dose-dense protocol; and

(c) after the completion of the second plurality of chemotherapy cycles, administering to the patient in a third plurality of chemotherapy cycles a therapeutically-effective and well-tolerated amount of cyclophosphamide, said third plurality of chemotherapy cycles being administered in a dose-dense protocol.

Claim 41 (previously presented): The method of claim 40, wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of less than 21 days.

Claim 42 (previously presented): The method of claim 41, wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of between 12 and 16 days.

Claim 43 (previously presented): The method of claim 42, wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of about 14 days.

Claim 44 (cancelled)

Claim 45 (previously presented): The method of claim 41, 42 or 43 wherein the number of cycles in each plurality of chemotherapy cycles is 3 or more.

Claim 46 (previously presented): The method of claim 45, wherein the number of cycles in each plurality of chemotherapy cycles is 4.

Claim 47 (previously presented): The method of claim 46, wherein the doxorubicin is administered in an amount of 60 mg/m².

Claim 48 (previously presented): The method of claim 47, wherein the taxane is paclitaxel.

Claim 49 (previously presented): The method of claim 48, wherein the paclitaxel is administered in an amount of 175 mg/m².

Claim 50 (previously presented): The method of claim 49, wherein the cyclophosphamide is administered in an amount of 600 mg/m².

Claim 51 (previously presented): The method of claim 40, wherein the number of cycles in each plurality of chemotherapy cycles is 3 or more.

Claim 52 (previously presented): The method of claim 51, wherein the number of cycles in each plurality of chemotherapy cycles is 4.

Claim 53 (previously presented): The method of claim 52, wherein the doxorubicin is administered in an amount of 60 mg/m².

Claim 54 (previously presented): The method of claim 53, wherein the taxane is paclitaxel.

Claim 55 (previously presented): The method of claim 54, wherein the paclitaxel is administered in an amount of 175 mg/m².

Claim 56 (previously presented): The method of claim 55, wherein the cyclophosphamide is administered in an amount of 600 mg/m².

Claim 57 (previously presented): The method of claim 40, wherein the doxorubicin is administered in an amount of 60mg/m².

Claim 58 (previously presented): The method of claim 57 wherein the taxane is paclitaxel.

Claim 59 (previously presented): The method of claim 58, wherein the paclitaxel is administered in an amount of 175 mg/m².

Claim 60 (previously presented): The method of claim 59, wherein the cyclophosphamide is administered in an amount of 600 mg/m².

Claim 61 (previously presented): The method of claim 40 wherein the taxane is paclitaxel.

Claim 62 (previously presented): The method of claim 61, wherein the paclitaxel is administered in an amount of 175 mg/m².

Claim 63 (previously presented): The method of claim 62, wherein the cyclophosphamide is administered in an amount of 600 mg/m².

Claim 64 (previously presented): The method of claim 40, wherein the cyclophosphamide is administered in an amount of 600 mg/m².

Claim 65 (previously presented): The method of claim 40, further comprising the step of administering to the patient a therapeutically effective amount of granulocyte colony stimulating factor (G-CSF).

Claim 66 (previously presented): The method of claim 65 wherein the G-CSF is administered between the chemotherapy cycles.

Claim 67 (previously presented): The method of claim 65 wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of less than 21 days.

Claim 68 (previously presented): The method of claim 67 wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of between 12 and 16 days.

Claim 69 (previously presented): The method of claim 68 wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of about 14 days.

Claim 70 (cancelled)

Claim 71 (previously presented): The method of claim 67, 68 or 69, wherein the number of cycles in each plurality of chemotherapy cycles is 3 or more.

Claim 72 (previously presented): The method of claim 71, wherein the number of cycles in each plurality of chemotherapy cycles is 4.

Claim 73 (previously presented): The method of claim 72, wherein the doxorubicin is administered in an amount of 60 mg/m².

Claim 74 (previously presented): The method of claim 73, wherein the taxane is paclitaxel.

Claim 75 (previously presented): The method of claim 74, wherein the paclitaxel is administered in an amount of 175 mg/m².

Claim 76 (previously presented): The method of claim 75, wherein the cyclophosphamide is administered in an amount of 600 mg/m².

Claim 77 (previously presented): The method of claim 65 wherein the number of cycles in each plurality of chemotherapy cycles is 3 or more.

Claim 78 (previously presented): The method of claim 77, wherein the number of cycles in each plurality of chemotherapy cycles is 4.

Claim 79 (previously presented): The method of claim 78, wherein the doxorubicin is administered in an amount of 60 mg/m².

Claim 80 (previously presented): The method of claim 79, wherein the taxane is paclitaxel.

Claim 81 (previously presented): The method of claim 80, wherein the paclitaxel is administered in an amount of 175 mg/m².

Claim 82 (previously presented): The method of claim 81, wherein the cyclophosphamide is administered in an amount of 600 mg/m².

Claim 83 (cancelled)

Claim 84 (cancelled)

Claim 85 (cancelled)

Claim 86 (cancelled)

Claim 87 (cancelled)

Claim 88 (cancelled)

Claim 89 (cancelled)

Claim 90 (cancelled)

Claim 91 (cancelled)

Claim 92 (cancelled)

Claim 93 (cancelled)

Claim 94 (cancelled)

Claim 95 (cancelled)

Claim 96 (cancelled)

Claim 97 (cancelled)

Claim 98 (cancelled)

Claim 99 (cancelled)

Claim 100 (cancelled)

Claim 101 (cancelled)

Claim 102 (cancelled)

Claim 103 (cancelled)

Claim 104 (cancelled)

Claim 105 (cancelled)

Claim 106 (cancelled)

Claim 107 (cancelled)

Claim 108 (cancelled)

Claim 109 (cancelled)

Claim 110 (cancelled)

Claim 111 (cancelled)

Claim 112 (cancelled)

Claim 113 (cancelled)

Claim 114 (cancelled)

Claim 115 (cancelled)

Claim 116 (cancelled)

Claim 117 (cancelled)

Claim 118 (cancelled)

Claim 119 (previously presented): A method for treating breast cancer in a patient having a chemotherapy responsive breast cancer, comprising administering to the patient in a dose-dense protocol, therapeutically-effective and well-tolerated amounts of doxorubicin, a taxane and cyclophosphamide in a plurality of chemotherapy cycles.

Claim 120 (previously presented): The method of claim 119, wherein the doxorubicin is administered first, the taxane second and the cyclophosphamide third.

Claim 121 (previously presented): The method of claim 119, wherein the doxorubicin is administered first, the cyclophosphamide second and the taxane third.

Claim 122 (previously presented): The method of claim 119, wherein the taxane is administered first, the doxorubicin second and the cyclophosphamide third.

Claim 123 (previously presented): The method of claim 119, wherein the taxane is administered first, the cyclophosphamide second and the doxorubicin third.

Claim 124 (previously presented): The method of claim 119, wherein the cyclophosphamide is administered first, the taxane second and the doxorubicin third.

Claim 125 (previously presented): The method of claim 119, wherein the cyclophosphamide is administered first, the doxorubicin second and the taxane third.

Claim 126 (cancelled)

Claim 127 (cancelled)

Claim 128 (cancelled)

Claim 129 (previously presented): The method of claim 119, further comprising administering to the patient a therapeutically effective amount of granulocyte colony stimulating factor (G-CSF).

Claim 130 (previously presented): The method of claim 119, wherein the taxane is administered concurrently with the cyclophosphamide.

Claim 131 (previously presented): The method of claim 119, wherein the taxane is administered concurrently with the doxorubicin.

Claim 132 (previously presented): The method of claim 119, wherein the cyclophosphamide is administered concurrently with the doxorubicin.

Claim 133 (previously presented): The method of any of one of claims 119 to 132, wherein the doxorubicin is administered in an amount of 60 mg/m².

Claim 134 (previously presented): The method of any of one of claims 119 to 132, wherein the taxane is administered in an amount of 175 mg/m².

Claim 135 (previously presented): The method of any of one of claims 119 to 132, wherein the cyclophosphamide is administered in an amount of 600 mg/m².

Claim 136 (previously presented): The method of any of one of claims 119 to 132, wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of less than 21 days.

Claim 137 (previously presented): The method of any one of claims 119 to 132, wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of between 12 and 16 days.

Claim 138 (previously presented): The method of any one of claims 119 to 132, wherein the dose-dense protocol specifies an interval of time between any two consecutive chemotherapy cycles of about 14 days.